FOR INSTRUCTIONS, SEE BACK OF FORM CHECK ONE:	IA ETHICS AND	FORM DR-1	STATEMENT OF ORGANIZATION
/∐ This is an amended* Statement of Organization	AIGN DISC REMEDIA	(Rev. 07/2009) For Office Use	<u>Dniy</u>
*An initial Statement of Organization must be filed within 10 days of the conmaking expenditures, or incurring indebtedness exceeding \$750. AP\$ 136	<b>Ours Truet Se (Recificity) hits 30 days</b> of	Comm.#	
a change. Penalties may be imposed for late-filed Statements of Organizal committee that exceeds \$750 in activity for another office shall file within 10 DR-1 disclosing information concerning the campaign for the new office sou	days either a new or amended	Audited Computer	
COMMITTEE NAME 1.4 (A candidate's committee must include the candidate's last name in the name of the committee.) If amending committee name, put old name in ( ).			
IMPORTANT: Indicate type of committee you are reporting for:			
(1)Statewide/Legislative/Judge Standing for Rotention Candidate (2)Statewide PAC (3)State Party (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (11) Local Ballot lesue (Including committee involved in multiple city/county ballot lesues)			
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (manda	story except for a c	andidate's committee)
Name + J:11 Altinger	Name ↓ ↓		
Malling Address & No Plaine Greek Dr	Mailing Address ↓ ↓	•	•
City, State + + Zip Code + +	City, State ↓ ↓ Zip Code ↓ ↓		
Phone (575) 986 - 4831	Phone ( )		
o-Mail sitringers and a mchsican e-Mail			
INDICATE PURPOSE OF COMMITTEE - Check One Box X Advocate for/against candidate(s) Advocate for ballot issue(s)  Comment or description:  Advocate against ballot issue(s)			
All Candidates Enter: Office Sought: Commes City Commes	County/Local Candidates s		
Political Party (If applicable) UA County: Vel K (If active in multiple ballot issue elections, attach list of counties			
District Grings Date of Election: Non 37 2009			
Year Standing for Election:			
Bank Account Name (must meton committee name)	Candidate name & Address or Pr	rent Entity (PACs. filiate, or Sponsor	
Name of Financial Institution/type of Account	Jill Altring	~	· .
Banke / Chacling Malling Address	104 DW Prais	state +	
110 SE Hein St	Grines	TA	SOUL
City	Phone (5357 986 - 4	831	
Grines IA Soil	O-Mall altagers	ad Comch	Sicon
STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:			
1. The committee and all persons connected with the committee understand that they are subject to the laws in lows Code chapters 68A and 68B and the administrative rules in Chapter 351 of the lows Administrative Code,			
<ol> <li>That low Code section 68A.402 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil senctions.</li> </ol>			
3. That lows Code section 68A.405 and rules 351—4.38 (through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items excepted by statute or rule. A committee that wishes to register a committee name for purposes of using the shorter "paid for by" and does not intend to cross the \$750 filing threshold shall file the Form DR-SFA form in lieu or fitting this form.			
4. That lows Code section 55A.503 and rules 351-4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.			
5. A candidate and a candidate's committee may only expend campaign funds as permitted by lows code sections 88A.301 through 68A.303 and rule 351—4.25.			
6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.			
Mrs. Date Storad Att.			
III M/m-1	11-5-1	vara augmed	All M:
Signature of Candidate, Oct. for all other committees, Chairperson	11	Date Signed	Sue-
www.iowa.gov/ethics seat down to the bottom start first			